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BIBDATASHEET

CONFIRMATION NO. 7748

Bib Data Sheet

SERIAL NUMBER 10/054,568	FILING DATE 01/22/2002 RULE	CLASS 455	GROUP ART UNIT 2685	ATTORNEY DOCKET NO. 874.0105.U1(US)
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APPLICANTS

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** CONTINUING DATA *****

None

n/a

** FOREIGN APPLICATIONS *****

None

n/a

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/19/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <u>[Signature]</u> Initials: <u>ms</u>	FINLAND	6	15	5

ADDRESS

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TITLE

Direct conversion receiver architecture

FILING FEE RECEIVED 908	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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